

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>9985</u>	2 Fiscal Year Covered From <u>1</u> / <u>31</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Roger</u> <u>W</u> <u>Fewkes</u> P O Box Bldg Room No if any <u>#8</u> Street <u>12506 Royal Rd</u> City <u>El Cajon</u> State <u>California</u> ZIP Code + 4 <u>92021</u>	4 Name file number and address of labor organization Name <u>Sheet Metal Workers Local 206</u> Labor Organization File Number <u>026-049</u> P O Box Building and Room Number if any <u></u> Street <u>4594 Mission Gorge Pl</u> City <u>San Diego</u> State <u>California</u> ZIP Code + 4 <u>92120</u>
5 Position in labor organization <u>Business Representative</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name <u></u> Trade Name if any <u></u> P O Box Bldg Room No if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a Nature of Interest, Transaction or Income <u></u> 7.b Amount <u></u>

Signature

15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions)		
Signed <u>Roger Fewkes</u>	On <u>8-11-05</u> Date	<u>(619) 561-3429</u> Telephone Number

Name of Person Filing Roger Fewkes

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Sheet Metal JATC of San Diego

Trade Name if any

P O Box Bldg Room No if any

Street 4596 Mission Gorge Pl

City San Diego

State California ZIP Code + 4 92120

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Sheet Metal JATC of San Diego

Trade Name if any

P O Box Bldg Room No if any

Street 4596 Mission Gorge Pl

City San Diego

State California ZIP Code + 4 92120

11 a Nature of such dealing

Student at Advanced Apprentice Instructors Training

11 b Approximate dollar value of such dealing

\$1 655

12 a Nature of interest held or income received

1 week wage reimbursement

12 b Amount

\$1 066

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Sheet Metal JATC of San Diego

Trade Name if any

P O Box Bldg Room No if any

Street 4596 Mission Gorge Pl

City San Diego

State California ZIP Code + 4 92120

10 If 9 b or 9 c is checked give trust or employer's name

Name Sheet Metal JATC of San Diego

Trade Name if any

P O Box Bldg Room No if any

Street 4596 Mission Gorge Pl

City San Diego

State California ZIP Code + 4 92120

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

11 a Nature of such dealing

Trustee and Judge at Regional Apprenticeship Contest

11 b Approximate dollar value of such dealing

\$819

12 a Nature of interest held or income received

Wage Reimbursement

12 b Amount

\$412

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name International Training Institute

Trade Name if any

P O Box Bldg Room No if any Suite 240

Street 601 N Fairfax St

City Alexandria

State Virginia ZIP Code + 4 22314

10 If 9 b or 9 c is checked give trust or employer's name

Name International Training Institute

Trade Name if any

P O Box Bldg Room No if any Suite 240

Street 601 N Fairfax St

City Alexandria

State Virginia ZIP Code + 4 22314

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

11 a Nature of such dealing

Advanced Instructors Training

11 b Approximate dollar value of such dealing

\$1 589

12 a Nature of interest held or income received

Per Diem

12 b Amount

\$320